

| POSITION            | INITIALS | ID NO. | DATE    |
|---------------------|----------|--------|---------|
| FEE DETERMINATION   | A.H.     | 22192  | 1/16/99 |
| O.I.P.E. CLASSIFIER |          | 16     | 1/8/99  |
| FORMALITY REVIEW    |          | 1-5703 | 1-14-99 |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 - ..... Restricted O ..... Objected

| Claim | Final | Original | Date   |
|-------|-------|----------|--------|
| 1     | ✓     | 72549    |        |
| 2     |       | 11232    |        |
| 3     |       | 14733    |        |
| 4     |       | 43702    |        |
| 5     |       |          | 7/1/93 |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here.

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